## PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003

Application or Docket Number

062020-1440

|   |  |   |                  |   |             | 1                |                 |                        |                               |            |                        |
|---|--|---|------------------|---|-------------|------------------|-----------------|------------------------|-------------------------------|------------|------------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |   |                  |   |             |                  | SMALL E         | OR                     | OTHER THAN<br>OR SMALL ENTITY |            |                        |
| TOTAL CLAIMS  |  |   | 33               |   | 465         |                  | RATE            | FEE                    | 1                             | RATE       | FEE                    |
| FOR   |  |   | NUMBER           | FILED                                       | NUMB        | ER EXTRA         | BASIC FEE       | 375.00                 | OR                            | BASIC FEE  | 750.00                 |
| TOTAL CHARGEABLE CLAIMS   |  |   | 35 mir           | us 20=                                      | *           | 15               | X\$ 9=          | 135                    | OR                            | X\$18=     |                        |
| INDEPENDENT CLAIMS  |  |   |                  |   |             | 1                | X42=            | 42                     | OR                            | X84=       |                        |
| MU  | LTIPLE DEPEN                                   | IDENT CLAIM PI                            | RESENT           |   |             |                  | +140=           | 1.                     | 1                             | +280=      |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |  |   |                  |   |             |                  | TOTAL           | 0                      | OR                            | TOTAL      |                        |
| CLAIMS AS AMENDED - PART II   |  |   |                  |   |             |                  | TOTAL           | 562                    | OR                            | OTHER      | THAN                   |
|   |  | (Column 1)                                | WILNOLD          | (Colum                                      | n 2)        | (Column 3)       | SMALL           | OR                     | SMALL                         |            |                        |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | HIGHE<br>NUME<br>PREVIO<br>PAID F           | BER<br>USLY | PRESENT<br>EXTRA | RATE            | ADDI-<br>TIONAL<br>FEE |                               | RATE       | ADDI-<br>TIONAL<br>FEE |
| NDM   | Total  |   | Minus            | **  |             | =                | X\$ 9=          |                        | OR                            | X\$18=     |                        |
| AME   | Independent                                    | *   | Minus            |   |             | -                | X42=            |                        | OR                            | X84=       |                        |
| L   | FIRST PRESE                                    | NTATION OF MI                             | JLTIPLE DEI      | PENDENT                                     | CLAIM       |                  | +140=           |                        | OR                            | +280=      |                        |
|   |  |   |                  |   |             |                  | TOTAL           |                        | -                             | TOTAL      |                        |
|   |  | (Column 1)                                |                  | nn 2)                                       | (Column 3)  | ADDIT. FEE       | <b></b>         | Jon                    | ADDIT. FEE                    |            |                        |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENOMENT |                  | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR |             | PRESENT<br>EXTRA | RATE            | ADDI-<br>TIONAL<br>FEE |                               | RATE       | ADDI-<br>TIONAL<br>FEE |
| NDN   | Total  | *   | Minus            | **  |             | =                | X\$ 9=          |                        | OR                            | X\$18=     |                        |
| AME   | Independent                                    | *   | Minus            | ***   |             | =                | X42=            |                        | OR                            | X84=       |                        |
| L   | FIRST PRESE                                    | NTATION OF MI                             | JLTIPLE DEF      | PENDENT                                     | CLAIM       | ل ا              | +140=           |                        |                               | +280=      |                        |
|   |  |   |                  |   |             |                  | TOTAL           |                        | OR                            | TOTAL      |                        |
|   |  | (0-1: 4)                                  |                  | (0-1  | 01          | (0-1 0)          | ADDIT, FEE      | L                      | OR                            | ADDIT. FEE | <u> </u>               |
|   |  | (Column 1)<br>CLAIMS                      |                  | (Colum                                      | ST          | (Column 3)       |                 | ADDI                   |                               |            | 100                    |
| AMENDMENT C   |  | REMAINING<br>AFTER<br>AMENDMENT           |                  | PREVIC<br>PAID I                            | USLY        | PRESENT<br>EXTRA | RATE            | ADDI-<br>TIONAL<br>FEE |                               | RATE       | ADDI-<br>TIONAL<br>FEE |
| NDN   | Total  | *   | Minus            | **  |             | =                | X\$ 9=          |                        | OR                            | X\$18=     |                        |
| AME   | Independent                                    | *   | Minus            | ***   |             | L=               | X42=            |                        | OR                            | X84=       |                        |
| Ļ   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                  |   |             |                  | +140=           |                        | -                             | +280=      |                        |
| " If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." |  |   |                  |   |             |                  | TOTAL           |                        | OR                            | TOTAL      |                        |
| ***   | If the "Highest Nu                             | mber Previously P                         | aid For" IN TH   | S SPACE is                                  | less tha    | n 3, enter "3."  | ADDIT. FEE      |                        |                               | ADDIT. FEE | ببننا                  |
| -   | The "Highest Nun                               | nber Previously Pa                        | id For* (Total o | r Independe                                 | nt) is the  | highest number   | found in the ap | propriate bo           | x in co                       | lumn 1.    |                        |